## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

appropriate. All further indicated unless correct maintenance fee notifications.	ed below or directed oth	ng the Patent, advance onerwise in Block 1, by (	rders and notification of a) specifying a new con	maintenance fee respondence addre	s will be ess; and/o	mailed to the current r (b) indicating a sep	t correspondence address as arate "FEE ADDRESS" for
CURRENT CORRESPOND 20995	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.						
KNOBBE MA 2040 MAIN ST FOURTEENTH	I Si ao tr	Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
IRVINE, CA 92	2614						(Depositor's name)
			_				(Signature)
			L				(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTO	OR .	ATTO	RNEY DOCKET NO.	CONFIRMATION NO.
10/563,514 TITLE OF INVENTION	04/27/2006 I: TRANSMISSION SYS	STEM AND METHOD F	William Wesley Marti FOR CONTROLLING TO			JDL36.003APC	8646
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	E PREV. PAID IS	SUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0		\$1810	06/23/2009
EXAM	EXAMINER		CLASS-SUBCLASS				
LE, DAVID D		3655	477-174000				
CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  Knobbe, Martens,  Olson & Bear, LLP				
		A TO BE PRINTED ON ified below, no assignee pletion of this form is NO	data will appear on the T a substitute for filing a	patent. If an ass in assignment.			locument has been filed for
(A) NAME OF ASSI		(B) RESIDENCE: (CITY and STATE OR COUNTRY)					
Zeroshift Limited Milton Keynes, GREAT BRITAIN							
Please check the appropri	riate assignee category or	categories (will not be p	rinted on the patent):	Individual 🛚	Corporati	ion or other private gr	oup entity Government
4a. The following fee(s) are submitted:  Issue Fee  Dublication Fee (No small entity discount permitted)  Advance Order - # of Copies 10			b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 11-1410 (enclose an extra copy of this form).				
5. Change in Entity Sta	itus (from status indicate		☐ b. Applicant is no le	onger claiming SM	IALL EN	TITY status. See 37 C	FR 1.27(g)(2).
NOTE: The Issue Fee an interest as shown by the	nd Publication Fee (if req records of the United Sta	uired) will not be accepte ites Patent and Trademark	d from anyone other than c Office.	the applicant; a r	egistered	attorney or agent; or the	he assignee or other party in
Authorized Signature		6		Date	lune 16	, 2009	
Typed or printed name Neil S. Bartfeld, Ph.D.				Registratio	n No	39,901	
submitting the complete this form and/or suggest Box 1450, Alexandria, V Alexandria, Virginia 223	d application form to the ions for reducing this bu /irginia 22313-1450. DC 313-1450.	FR 1.311. The informatic U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to the D NOT SEND FEES OR persons are required to re	depending upon the include Chief Information Off COMPLETED FORMS	lividual case. Any icer, U.S. Patent a TO THIS ADDRI	nd Trader ESS. SEN	ts on the amount of the mark Office, U.S. Dep D TO: Commissioner	d by the USPTO to process) ng gathering, preparing, and me you require to complete partment of Commerce, P.O. for Patents, P.O. Box 1450, l number.